Request for Proposals

RFP #20049

New York State Elderly Pharmaceutical Insurance Coverage (EPIC) and American Indian Health AIH Programs

AMENDMENT #2 April 14, 2021

The following are official modifications, which are hereby incorporated into the New York State Department of Health, New York State Elderly Pharmaceutical Insurance Coverage (EPIC) and American Indian Health (AIH) Programs Request for Proposals (RFP) #20049, issued February 12, 2021. The information contained in this amendment prevails over the original RFP language. For all amendments below, deleted language appears in red and strikethrough ("xxx") and added language appears in underline ("xxx").

RFP#20049-New York State Elderly Pharmaceutical Insurance Coverage (EPIC) and American Indian Health (AIH) Programs)			
EVENT	DATE		
Issuance of Request for Proposals	February 24, 2021		
Deadline for Submission of Written Questions	March 10, 2021 4:00 p.m. ET		
Responses to Written Questions Posted by the Department	On or About April 7, 2021		
Deadline for Submission of Proposals	May 7, 2021 May 14, 2021 4:00 p.m. ET		
Anticipated Contract Start Date	May 1, 2022		

New York State Department of Health

New York State Elderly Pharmaceutical Insurance Coverage (EPIC) and American Indian Health (AIH) Programs

RFP# 20049 Questions and Answers 4/8/2021

Question	Subject	Bidder's Question	Answer
6	4.0 Scope of Work Page 7 Claims Processing	Will the contractor be responsible for handling paper claims for AIHP?	No, any paper claims for AIH are sent to DOH.
7	4.1.1 Implementation/Tasks & Deliverables Page 8 item C.10	What is the State's definition of parallel testing?	Parallel Testing is a software testing type in which multiple versions or subcomponents of an application are tested with same input on different systems simultaneously to reduce test execution time. The purpose of parallel testing is finding out if legacy version and new version are behaving the same or differently and ensuring whether new version is accurate and more efficient or not.
8	4.1.2.2 Enroll/Re- enroll Members Page 10 item 2.f	What other prescription coverage determination is required for eligibility?	The applicant must be enrolled or eligible to be enrolled in a Medicare Part D plan (no exceptions), and not be receiving full Medicaid benefits.
9	4.1.2.3 Automated/Electronic Application Portal Page 11	What are the member- facing functionalities/fields that need to be presented on the member portal?	All of the same fields/information required on the paper application. (attach a paper application for reference) See EPIC Application in Bidder Library
10	4.1.2.4 E-Commerce Portal Page 12	What are the annual volumes of member payments?	78,236 member payments were received in 2020.
11	4.1.2.6 Request for Additional Information (RFAI) Page 12	What are the annual volumes for RFAI and how often are recertifications completed?	In 2020 8,276 RFAIs were mailed.
12	4.1.2.7 Reconciliation with Medicare Part D Plans/Premium Payments Page 13, item b	What is the annual volume of retro changes and how frequently do retro changes occur?	There were 7,644 retro changes in 2019 and 2,853 retro changes in 2020. They are continuous and always ongoing, and the volume varies and is hard to predict.
13	4.1.2.8 Customer Service/Member and	Is the backup call center for provider and/or member calls?	Both

2

Documents added to Bidder's Library:

- 1. EPIC Application
- 2. SSP Workbook System Overview (as required in section 4.5 of RFP)